

If you wish to receive a certificate of completion for your file, **you and your supervisor need to sign** this form and mail it to:

Training & Development Division of Human Resources P.O. Box 83720 Boise, Idaho 83720-0066

I have completed all units and activities in the Di- Performance Management program.	vision of Human Resource's online
Employee Name (Please print)	Title
Agency	Date
Agency Mailing Address	
Supervisor Signature	Date
Title	

We would appreciate your feedback on this online program. Comment below or email us at: training@dhr.idaho.gov.